

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF Edward Rainey		COURT CASE NUMBER CA 08-102 SLR
DEFENDANT Eugene R. Bailey		TYPE OF PROCESS OC
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) Eugene Bailey / Sylvia / Andy Haskow / Louis Harding Diamond State Port Corp (302) 472 7678 1 Hausel Road Wilm, De. 19801-5852	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		Number of process to be served with this Form - 285 7
Mark Williams - Witness Dave Clements (302) 898 7914 Steve Hinkle (302) 5939427 George - Witness		Number of parties to be served in this case 7
		Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Periorbital Contusion Report
Level 3 Grievance's - FY 2007 - #20
Crime Report From W.P.D
Work Place Violence Policy Section 522 Effective Date 5/10/04
Edward Rainey

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

(302) 594-1088

DATE

6-4-08**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 15	District to Serve No. 15	Signature of Authorized USMS Deputy or Clerk ST	Date 7-21-08
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Matthew Gaskin, Security Supervisor

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service

7/22/08

Time

245 pm

Signature of U.S. Marshal or Deputy

Service Fee 45.00	Total Mileage Charges (including end of trip mileage) 0.00	Forwarding Fee 0.00	Total Charges 45.00	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS: **David Clements Have more if Needed.**
Please call him, 898-7914 Business Agent, ILA Local 1694-1